



everything you wanted to know about

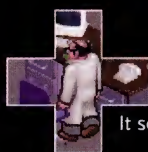
theme HOSPITAL



CONTENTS



Doctor, Doctor, I feel like a pair of curtains!
When did these feelings begin?
When I hung from the window frame and, oh no, sorry, that's not right...
I don't understand. What do you mean?



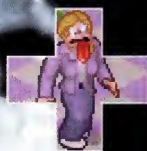
Doctor, Doctor, my brother thinks he's a chicken!
It sounds as though he is suffering from a severe form of delusional psychosis.
Here is the name of a good psychiatrist. He's a colleague of mine, I can
recommend him without hesitation.



Doctor, Doctor, my nose won't stop running!
I can see no sign of any such problem. In fact, I suspect you are
merely wasting my time. Please get out of my office.



Doctor, Doctor, I keep thinking I'm a bridgel
Just piss off.
Um. Sorry. Sorry to have bothered you.



everything you always wanted to know about

theme HOSPITAL

Surgeon General: Charlie Brooker
Cosmetic Surgeon: Jason Simmons
Paramedic: Alex Smith
Hospital Administrator: Jeremy Wells
Minister For Health: Tim Ponting

Special thanks to: Cathy Campos and
everyone at Bullfrog, especially the team
behind *Theme Hospital*.

PC Zone

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Hello there *Theme Hospital*. Now, what seems to be the trouble? Nip behind the screen, pop your clothes on the stool, and prepare yourself for a thorough examination at the hands of Dr Charlton Brooker M.A.D. BSe. We promise that this won't hurt a bit, and afterwards everyone will know why we at PC Zone are tipping you to be one of the biggest releases of next year. Don't worry about a thing. We've seen you Designer Series lot before, and we know exactly where you're coming from. Your big brother *Theme Park* went down very well with everyone here. What's that? You don't like needles? Well don't worry, all you'll feel is a little prick. Now where have you heard that before?



WELCOME TO THEME HOSPITAL

Do you remember *Theme Park*? You do? That's great! Well we think that *Theme Hospital* is even better. Yes we do. Let us explain...

HOSPITAL CUTS

Every game worth its salt has a fancy rendered intro sequence and bags of cut scenes and *Theme Hospital* doesn't buck the trend. Except that you'll actually want to watch these 'cos they're funny. Well we thought so.

CHARACTER BUILDING STUFF

Theme Hospital is full of people going about their daily business, watering plants, doing number twos and throwing up. How do Bullfrog manage to create so many different characters and breath life into such tiny people?

GET STAFFED!

So many staff and so little time. Remember, your hospital will only be as good as the people you employ to run it, so here's our very special guide to who does what best. Watch out for Mr Griffiths.

TRY YOUR PATIENCE

Theme Hospital uses a very sophisticated A/I to make the characters eat, drink and vomit their way around your hospital. In fact, it's so sophisticated you'll think they're real little people. We look at the ways you can make their pain-ridden lives just that little bit easier by including radiators and plants.

WILL I EVER PLAY THE PIANO AGAIN?

There are over 40 different diseases your little people can contract in *Theme Hospital*. We diagnose just a few to give an idea of what it's like to suffer from 'Slack Tongue' and 'Baldy Head'.

OH, WHAT A LOVELY WARD

Our very own Charlton Brooker presents his design for the hospital of the future. One day all hospitals will look like this... All the NHS ones do already. Sell your car, your wife and kids and go private — you know it makes sense!

DOCTORIN' THE MEDICS

The *Theme Hospital* team are a sickly lookin' bunch of individuals and quite frankly not the type of people you want to mix with. Luckily for you, we took it upon ourselves to do the dirty work for you, and ask them all sorts of questions from arm's length.

COMPETITION

WIN! WIN! WIN! Your very own, and very exclusive Bullfrog branded leather jacket and copies of the game. Smart!

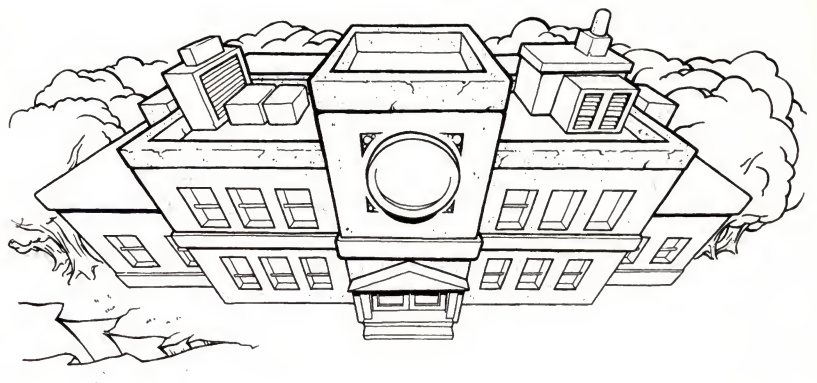


Illustration from the Chirurgia of Vidius showing a machine used for treating a fractured jaw



welcome to

WELCOME TO

THEME HOSPITAL



Theme Park. Remember *Theme Park*? Course you do. We reviewed it back in issue 17, awarding it a hulking great 93%. It sold by the warehouseful. And, like many of the most successful PC games, it later appeared in a converted form upon a wide variety of gaming platforms: 3DO, Playstation, Atari Jaguar, Megadrive — you name it, there's a version of *Theme Park* available for it. In fact, I wouldn't be surprised to learn that Peter Molyneux had gone back in time and tried to write a ZX Spectrum version for a laugh. Actually, that's a lie. I would be surprised. I would be very surprised indeed. But I digress.

The main reason *Theme Park* appeared on so many formats, and sold so many copies was that it was a bloody good game. And the second reason? The basic idea was an appealing one: starting from scratch, you had to assemble and maintain a *Theme Park* of your very own. Which meant building rollercoasters, hiring staff, running hamburger stands, and forcing your caretakers to mop up untold puddles of kiddie vomit, while simultaneously juggling the needs of the hapless customers against your own feverish desire to amass as much capital as possible.

Furthermore, every aspect of the game was packed with tiny details. The graphics were bright, cartoon-like, and intricate. The sound effects covered all the bases, from the joyous shrieks of the ghost train passengers, to the nauseating slap of fresh sick on gravel. And as for the gameplay, you could tinker with more or less everything — right down to the amount of glue sticking down the targets at the coconut shy (a typically Bullfrog touch of cheerful cynicism, that).

That was then, and this is now. This is *Theme Hospital*.

I speak your brains

Before we go any further, let me come over all Mystic Meg for a moment. I know what some of you are thinking. I do, you know. You're thinking "*Theme Hospital*? Hmm... sounds okay. Just like *Theme Park*, I expect. Mind you — a hospital. Probably a bit serious, innit? Bit antiseptic. Ooh, I just made a pun. Aren't I clever? I'm totally great, me. I should be writing for the stage or something. I'm a genius. I am king. I shall rule the galaxy. All men shall quake in terror whenever my name is spoken out loud. Those who choose not to follow me shall die in agony at the hands of my murderous army. I shall own the largest harem in the universe, filled with all the women I desire.



And some willing bison. And they shall all do my bidding. 24 hours a day. I am king. I am king. I am king."

Well stop right there, you egomaniacs. You see, you're not very clever at all, because you got it wrong right from the start. *Theme Hospital* is not "just like *Theme Park*", and you only have to look at some of the patients you'll be treating to see that this is anything but serious (on the surface at least). No, I'll tell you what we've got here, right? We've got an immensely detailed, stylish, intelligent and amusing strategy game from one of the best developers in the PC gaming world. So shut up and concentrate, arsehole.

Sick humour

Of course, being a sequel of sorts, *Theme Hospital* does share many elements of its predecessor. Like *Theme Park*, it's essentially a 'run your own business' game. More importantly, it's a 'run your own business' game that's eighteen zillion times more interesting than anything that involves the word 'business' has a right to be. It's crammed full of details (everything — everything — you see in the screenshots serves a purpose, even the plants and the windows). It has loads of neat gizmos to research and build (this time around they're medical 'rides', as it were). There's a constant influx of members of the public, each of whom has an individual reaction to events and surroundings. And there's a refreshing dose of tastelessness round every corner (some of the sound effects which emanate from the toilets are deliciously unnecessary).

So, similarities abound, but they've all been improved upon. *Theme Hospital* has 'more' of everything. We'll be looking at these things in more depth over the next few pages, but first, let me explain a few of the changes...

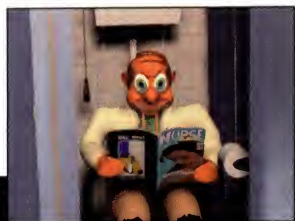
J'accuse: Theme Park

Judge Hardnuts: *Theme Park*, you stand accused of exhibiting a major flaw. How do you plead?



HOSPITAL

CUTS



Unlike George Michael (who only allows his photo to be taken from his 'good' side and then gets it flipped so fans don't become suspicious) *Theme Hospital* looks good from every angle. Even the intro and 'cut scenes' are worth a second and third look...

Like every other modern-day CD-ROM based extravaganza, *Theme Hospital* has a rather smart (and lengthy) rendered intro as well as some gorge-ola 'cut scenes' that kick in when you get the boot. Unlike just about every other game however, they're so well rendered, animated and amusing, they become quite addictive. You'll actually find yourself watching the intro more than once. In fact, you may even start to watch it every time you start up the game, and what's more you'll probably laugh (out loud) every time you do. Strange but true.

You'll probably crease up with mirth when you see the cut scenes that pepper the game

at regular intervals (i.e. every time you f**k up). As a result, you'll actually start playing the game only to reach the next level so that you can mess it up, which means you'll be treated to yet another hilarious scene involving a rather bemused looking doctor (you), a nurse, some drugs and maybe even a donkey — Ooh-eerrh! (Or should that be eeh-awwh?)

Getting all animated

Considering around half the *Theme Hospital* team are artists, it's no wonder that it looks so good. Unlike *Theme Park* which sported cutesy VGA graphics, *Theme Hospital* is all glorious hi-res (they're still debating whether to include a VGA mode so that people with 486's will be able to play it, but this is yet to be confirmed).

This means that it not only looks mega-detailed, but that everything takes approximately five times as long to draw and animate. You could try and work out the man hours it's taken to draw every 'person', item of furniture, plant, radiator and whizzo uber-cure machine from four different angles, but it would probably take you about seven years unless you're particular good at long multiplication and have a penchant for



Sal



A surgeon about to perform Caesarean section, while a priest pronounces the last offices. From the Armamentarium Chirurgicum of Scultetus of Ulm.

tally charts — so don't bother. It's a lot, okay? Just believe us! Programming? Pah! Any fool can knock out a quick batch of sub-routines and work in a route-finder. Piss easy stuff! You try making sprites the size of the nail on your little pinky look detailed and bursting with personality! Now that's hard work. That's bloody art mate!

In fact it's so labour intensive that the team don't even bother making lots of sketches before they start pixel-poking on their PCs — it would just take too long, as Lead Artist Gary Carr explains. "Drawing it all out on paper would take absolutely ages. There are so many characters, bits of furniture and machines it would make the whole process twice as long. And because most of the sprites are so small, by the time you've re-drawn it using the sprite tool on-screen, you'd have to make so many compromises there's just no point.

Just try adding measles to a sprite that big (makes size of a pea with his thumb and fore-finger) — you just can't do it, it's too tiny. Drawing it all out on paper is basically a waste of time. I've got it all in my head and if I need to change anything it's quicker to do it on-screen. Anyway, I've been doing this for so long now, I don't need to use paper any more. I'm environmentally friendly, I am."

Cutting stuff

The guys (and girl) who have rendered the intro and all the 'novelty' cut scenes aren't quite as green as Gary. Before they even start to render up anything, they have to draw it, work out a storyboard, animate it, re-draw it and re-storyboard it ("cos things in the game are constantly changing") and basically try and keep it current with what the rest of the team are doing, and at the same time keep it funny.

As far as the style is concerned, it's similar to the cutesy, cartoony style that proved to be so endearing in *Theme Park*, but at the same time it seems quite different, in a polished, just stepped out of the rendering salon kinda way.

However you describe it, it looks rather fab and you just can't help hoping that they'll eventually release a cartoon series or something so that you can watch it late on a Sunday morning, tucked up in bed with a cup of Ovaltine, chuckling to yourself.

But why, pray, go to so much trouble?

"Because the whole game looks so detailed, we wanted to make the intro and all the cut scenes extra special so that the player would actually sit up and take notice" maintains artist Adam Cogan. "So often you load up a game and don't even bother watching the intro all the way through. You just automatically reach for the escape key. We wanted people to watch them and enjoy them. That's why we've spent so much time scripting them, re-working them and polishing what we've got."

Without giving too much away, each little rendered snippet (of which there are loads — well, at least a dozen) tells a little story of how the head doctor honcho at the hospital (i.e. the player) has failed to reach the

objective required to progress to the next level, and is therefore fired.

In order to make these scenes more interesting than the usual 'game over' message, the team have decided to depict the abject failure caught indulging in a number of highly dubious activities. Consequently, you get to giggle at fascinating flicks of Dr Dodgy-Bloke being caught red-handed raiding the drugs cabinet, frolicking with a nurse in the linen cupboard or skimming funds from the hospital petty cash box (to name just three). All of them are funny, some are quite hilarious. In fact, we'd recommend you fail each level at least once just so you can have a bit of a laugh. Now how many games can you say that about?

multiple goregasms

Mark Webley and Gary Carr's dedication to their craft knows no bounds. That's why they found themselves taking part in a number of behind-the-scenes tours of real life hospitals, all in the name of research. Some of the things they discovered took them by surprise. "Hospitals are, in general, run very much as businesses — there really is an emphasis on making money", explains Mark. One of the establishments they visited even had its very own 'Arthur Daley' character in residence — "his office was a Portakabin somewhere out the back" — whose duties involved all kinds of shady wheeler-dealing with other hospitals, laundry firms, and medical suppliers. Not surprisingly, much of what they saw flavoured the content of the game.

But they didn't just inspect the financial structure — they were also there to see how everything looked. Even the operations: the pair of them sat in, Princess Di style, on a particularly grisly piece of surgery on

some poor soul's back.

"He was having a disc removed from his spine", says Mark, "it was all quite gory really. I was surprised Gary actually watched it, because he's really squeamish in real life — his cat bit him once and he collapsed with fright."

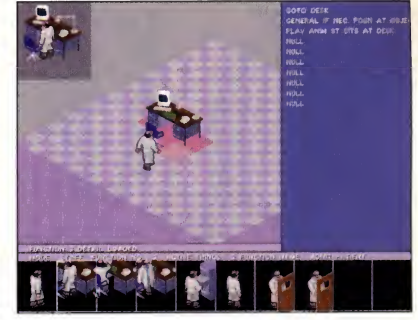
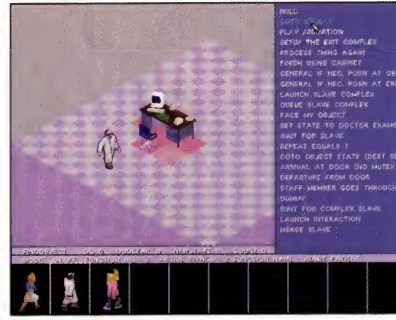
"I didn't collapse!", protests Gary, "but it was pretty horrible — I felt its tooth hitting the bone inside my finger, and that did freak me out."

Despite all these investigations into the ins and outs of hospital management, both are keen to stress that *Theme Hospital* is first and foremost a piece of entertainment. "If we'd made it ultra-realistic, it would've been accurate, but really quite boring — a piece of management training software that would only appeal to Germans. What we've done is to use our artistic licence quite a bit, to ensure that it's an exciting, entertaining game." And who can blame them for that, eh?





(Below) All the patients are constructed from Lego-style pieces. Except they're made out of pixels instead of plastic, innit?



Many things are referred to as 'character building'. Usually by P.E. teachers. Running around a 400 metre track seventeen times in a row on the shittiest day in the history of weather; grimacing in agony as your shoulder pops out of its socket during an eight hour trial by press-up; howling like a mutilated hound as the surliest, most psychotic boy-beast in school splinters your shinbone into a thousand spiny fragments with a well-aimed thwack from his hockey stick — all of these things are 'character building'. No wonder there are so many bitter, twisted people in this poxy godforsaken shitball of a world we live in. Bastards, bastards, all of you are bastards.

Well, not everybody. Take Gary Carr for instance. He isn't a bastard — although the task he's been working on is. In fact, it's the most character building assignment you could imagine. He builds characters.

Sprite hand man

All the character animations for *Theme Hospital* have been assembled in Bullfrog's custom-built sprite editing program, which used to be affectionately known as 'The Bug-Ridden Pile of Shite' since it had originally been knocked up in about ten minutes by Peter Molyneux way back in the dim and distant past. Since then it's been used in one

A design for life

Whenever I watch a programmer using an editing tool to assemble and manipulate the contents of a game, I'm always struck by the same thought. Well, two thoughts actually.

The first thought is "how come I'm not that clever? Why don't I just kill myself right now?", and the second thought is "I bet the Universe itself was designed like that". Because if there is a God (and you only have to watch one episode of *Goodnight Sweetheart* to start harbouring grave suspicions), I can't imagine him/her/it physically creating the Universe, but I can picture him/her/it sitting down in front of a gigantic celestial monitor, and doing it all with the mouse. Clicking here, dragging there, saving files, and occasionally doing stupid things to pass the time (hence the French). In fact, the more I think about it, the more I'm convinced that our entire cosmos exists within an onscreen directory somewhere on God's hard drive. Hmmm. I wonder if we run under Windows 95? And what happens if he ever frees up some disk space?



way or another during the production of almost every single Bullfrog release. And each time it's used, someone tweaks it a bit — adds a feature here, improves a fiddly bit there. It's slowly evolved into a functional, versatile editing tool. Right now, it's being used to put the finishing touches to a few of *Theme Hospital*'s outstanding visuals.

Early in the production Gary, *Theme Hospital*'s lead artist, decided that diversity among the game's human characters was an absolute must. "As soon as we realised that we wanted to do a very populated game where people were so important, we started thinking that we couldn't have 'puppet' looking people. There's people everywhere, so they have to look interesting. And you need diversity to keep it realistic. We knew we had to get lots of different characters in there, different illnesses... and loads of wacky looking stuff", he explains.

To this end, he set about producing a system whereby each on-screen character is randomly generated from a pool of different heads, legs, torsos, shoes, and skin colours. All of which had to be animated, from every available angle, performing an incredible variety of different actions. In high-res. High detail. And now Gary's got to make sure that everything — everything — works.

He groans. "This is the pain. There's loads of different things each character can do. They can go to the loo, they can get bored, get tired, open doors, walk around... and it means that each of these overlays has to be in exactly the right order. Otherwise you get glitches where heads suddenly start disappearing, or the jackets change colour when they walk through a door... that's what we're checking at the moment."

ISO NO SO-SO DODO

In these days of 'lets-make-it-3D-for-the-sake-of-it' absurdities (3D *Lemmings*, anyone?), it's refreshing to see a company like Bullfrog still championing the cause of the good old faithful isometric viewpoint. It's clean, it's neat, it's totally unconfusing, and it enables you to get a really good look at the action. Indeed, it's not unlike reserving the best seats at the theatre (as opposed to the half-price 'restricted view' ones, which place you directly behind three stone pillars, an offensively obese couple (wearing ten-gallon hats), and a gigantic marble statue of William Shakespeare's arse). Beginning with *Knight Lore* on the ZX Spectrum, there's been a grand tradition of classic titles boasting uncluttered 'iso' viewpoints — a list which includes *Get Dexter*, *Populous*, *UFO*, *Little Big Adventure*...and now, *Theme Hospital*.

You only have to glance at the sheer number of individual drawings and animations (see left) that pass through Gary's editing program to appreciate what a logistical nightmare this must be.

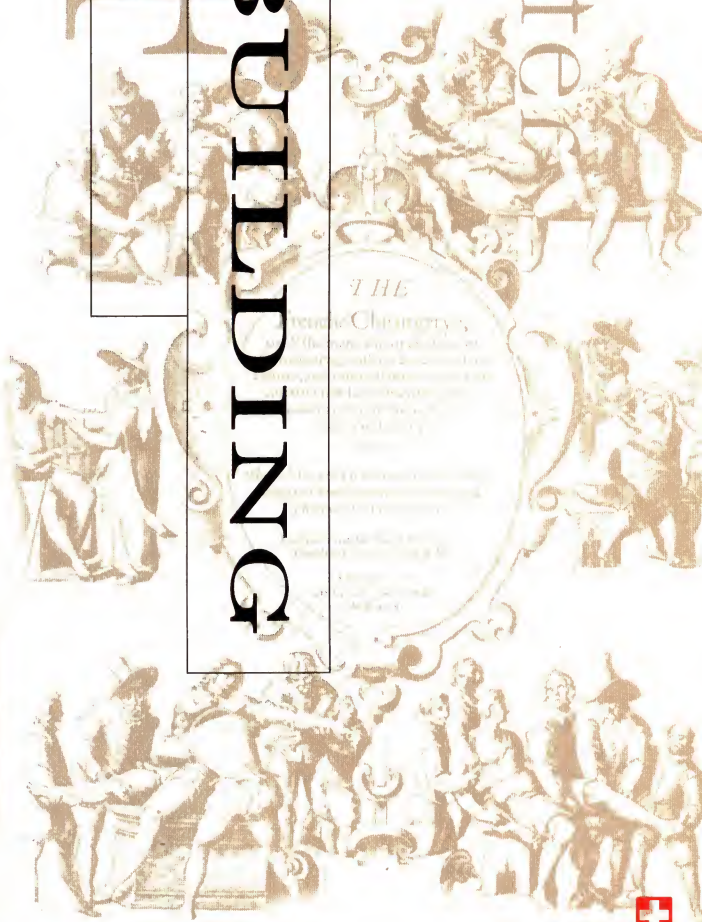
A pain in the art

Did they have any idea just how painstaking it would be when they started? "No — it's our own fault really", he says. "It was only when we started doing it that it became apparent how long it was going to take."

He laughs. "That's when I thought: what a stupid idea to have had. But then it was too late. If you look at *Theme Park* that had, I think, 850 animated sequences. This has already got over 2000... but then you have to multiply that again by all these different character combinations. It's taken a long, long time — but hopefully that'll show in the finished product."

And by 'eck, it does. There's an outrageous level of graphical detail. Everywhere you look, there's a different activity being performed, from off-duty games of pool in the staff room, to constipated patients grimacing in pain as they try to take a dump in the toilets. Caretakers watering plants. Nurses administering drugs. Critical cases dropping dead in the corridors. All of it seamlessly flowing around on screen as if none of it had been planned, built, tweaked, and sweated over, but is simply happening instead. It's impressive, satisfying, believable — and positively thriving with life. Gary and the team may well have been driven irreparably doolally by the sheer effort it demanded — but thankfully not in vain.

CHARACTER BUILDING STUFF



The title-page of *The French Chirurgie* of Jacques Guillemeau.



Illustration from the Armamentarium Chirurgicum of Scultetus of Ulm showing a method of draining fluid from the abdomen.



It's no good filling your wards with the latest hi-tech medical gadgetry if the people who operate it are a bunch of brainless, dunderheaded oafs. You'll need to choose them wisely...



Doctors

A good doctor is like a good lover: you're not perturbed when either asks to insert an index finger into your backside. Er, apparently. Anyway, it's a good idea to choose your doctors wisely. For starters, the ones who come 'pre-supplied' with a particular skill (surgery, psychiatry, or research) are especially useful since they don't need to be educated in-house. It's also important to try and select one who's speedy and competent, the downside of which is that said docs tend to cost the earth.

Once you've got some doctors, for God's sake keep them happy. Provide a staff room. Chuck them a pay rise now and again. One of your priorities should be to ensure that they get plenty of rest: knackered doctors tend to make costly mistakes (sometimes resulting in death). And we don't want that now, do we?

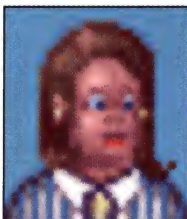


Nurses

Why do so many men have a 'thing' about nurses? Personally, I associate nurses, and nurse's uniforms, with *Casualty* (which I hate) and the faint smell of vomit that's often floating around in children's wards. And they're so bloody nice. Running around helping people all day long. Rushing to and fro, wearing themselves into the ground, having ill people spew blood down their fronts, and then getting paid a pittance for the privilege. How nice.

Well that doesn't make them 'nice' if you ask me. No. That makes them stupid. Stupid, stupid bloody women without an

(Right) From the hyper-handly Staff Manager screen, you can compare the relative merits of your entire team at a glance. You also get to look at a mugshot, so it's easy to work out which one's got the biggest nose.



				AVERAGE	AVERAGE	AVERAGE
1	O. WHITSON	\$195				
2	R. BONNBAUM	\$151				
3	O. CAMBERRY	\$153				
4	L. BINNISON	\$151				
5	V. ANDINGTON	\$155				
6	B. WHITLEY	\$145				
7	J. GOLDCLIFFE	\$252				
8	P. WARLEY	\$188				

ounce of sense in their heads. Can't they see that the government's just laughing at them? Forcing them to work for sod all, in rundown hospitals, for absurd lengths of time... and they still care enough about the human race to try and help them out? Jaysus! They're imbeciles — imbeciles I tell you. Why don't they pursue a worthwhile career? Such as Financial Adviser, or Bank Clerk, or something proper like that?

Anyway, they're really useful in *Theme Hospital*. So pick them carefully.

Receptionist

The person who tells people where to go. Now there's an appealing job. Patients won't actually begin to arrive in your hospital until there's a receptionist there, so try and bag one straight away (the computer player tends to nick 'em as quick as

possible). And having two receptionists is definitely better than one. If only so they've



got somebody to sit down and gossip to while they're ignoring the mounting queue.

Caretaker

A.k.a. Mr Griffiths from *Grange Hill*. These guys have a firm grasp of the shitty end of the stick, career-wise. Once they dreamt of heading the board at ICI. Now they spend their days mopping up steaming pools of vomit. Their nostrils are permanently filled with the acrid stench of half-digested food, soaked in hot regurgitated bile. Semi-absorbed chunks of ejected lunch-time chow, squishing underfoot with a ghastly malleability. Their working day is spent treading a virtual carpet of emptied stomach content, a sour slick of nauseating ooze, an ocean of second-hand slime. They are the PukeMeisters.

Oh, they also have to water plants and fix machinery as well. So it's not all bad.





Every single patient who enters your hospital is an individual. They look different, yes, but they also think and act differently. The program continually checks all manner of variables concerning each person; how their heart, mind, bowels, stomach and lungs are holding up, and their current level of happiness. Every single item in your hospital will affect them in some way, so let's take a look at a just a few examples...



Plants

Ah, the healing powers of good ol' Mother Nature. A smattering of flora does wonders for a fellow's constitution, you know. All that green, lush goodness makes a welcome change from the relentless clinical atmosphere that surrounds. It cheers everybody up, and makes the air cleaner to boot (and even cleaner to breathe). Be careful though, they'll die if your caretakers start neglecting them. Rows of drooping, dying plants lend the place an eerie air of doom, and the patients don't like that one bit.



Radiators

You've got to be clinical, but you don't have to be cold. A shivering patient is a miserable patient (not forgetting the health risks involved), so it's a good idea to keep the masses warm by chucking radiators down every so often. Let things get a little too heated however, and people start getting thirsty and uncomfortable. Decisions, decisions...



Seating

Nobody likes standing around like a lemon, particularly when they're ill. Getting the seating right is another priority. You'll need to provide enough benches, in the right places if people aren't going to be literally dead on their feet.



Queueing

Wait your turn. Stand in line. Take a number. Be patient. Bollocks to that. Who enjoys queueing anyway (unless the person in front of you has a gorgeous and/or fascinating arse)? If you happen to be ill, waiting too long can be dangerous (just ask anyone using the NHS). Skillful queue management should ensure that there aren't ridiculous waiting lists for the most 'popular' rooms.



Windows

When drawing up the blueprints for a room, don't forget to include a couple of windows. People generally don't like being kept in the dark. Unless, of course, a little privacy is called for in that particular room (i.e. if anyone passing by is likely to snatch a glimpse of your pathetically unsightly genitals).



Fire Extinguishers

Be prepared. Accidents can happen at any time. Machinery can malfunction. But it's less likely to explode if you've got one of these nearby. Should a particular piece of equipment blow up, you won't be able to build over its location, which is a bit of a nightmare to say the least. So don't forget 'em.



Vomiting

Let's face it, when you're feeling peaky, all sorts of things can make you feel worse. The mere mention of fried bread, for instance. Or the smell of sour milk. Or both together, mashed into paste and smeared all over the roof of your mouth. Still, nothing can compare to the stomach-strangling sight of another human being hurling his lunch to the floor with a bilious, choking retch, right in front of you. Clean it up quick or they'll all be at it.



Infections

Some diseases are infectious. Ever seen *Outbreak*? Then you'll know what I'm talking about. Try to contain any burgeoning epidemics by curing victims quickly, isolating them, or (if you're a bastard) referring them to a rival hospital.



Toilets

All I'll say is this: build sufficient toilets. You won't regret it.



Layout

Keep a clear head when planning the position of your facilities. Not only have they got to be easy to find, they shouldn't take up too much room (unless you're sure you won't need to build any more areas). Sometimes it's possible to buy new plots of land... but until then you've got to keep your wits about you. Try to avoid narrow corridors and bottleneck areas too.



Vending Machines

These serve two major functions: they quench thirst and provide a bit of extra revenue. Hooray. Still, every silver lining has a cloud — they require maintenance now and again. More ominously, they make people use the toilets more. You have been warned.



Litter

Not only is it unsightly, it's downright unhealthy. You wouldn't catch Dr Hilary Jones living in a skip now, would you? Unless he developed a really bad drink problem, lost his job, and went a bit crazy that is. Actually, come to think of it, I'd like to see him in a skip. Preferably wrapped in a bit of sackcloth, stiff as a post. But I digress: litter is bad. Let it build up, and you'll get infested by rats. So tidy up, or it's no supper for you tonight.



TRY YOUR PATIENCE

famous doctors

Doctor Who: Legendary dalek-botherer with a nice line in quirky English eccentricities (i.e. he dressed like a madman), and an unhealthy interest in energetic, fresh-faced female companions. He had two hearts and several different lives. But only the one penis. We assume.

Doctor David Banner: ...is believed to be dead. And he must let the world think that he is dead, until he can find a way to tame the beast that lurks within.

Doctor Beat: As in "won't you help me Doctor Beat? Doc-doc-doc-doc Doctor Beat?"; an early hit for Gloria Estefan and the Miami Sound Machine. Ironically, Gloria found herself requesting help from real doctors a few years later, when a massive

coach crash ensured that she'd spend the rest of her performing career shuffling around awkwardly onstage like some kind of singing hat stand.

Doctor Kildare: Smooth-as-silk Scottish practitioner who starred in a TV series that effortlessly managed to be both wildly popular and crashingly dull at the same time.

Doctor Foster: He went to Gloucester, but ended up in a very large puddle, for reasons that rhyme rather neatly, but are ultimately little more than a futile distraction from the serious trials of everyday life. (© *The Oxford Dictionary of Haven't You Got Anything Better To Do?*, Oxford University Press, £79.99)

Doctor Jekyll: Invented a strange potion that transformed him into a raving lunatic. A none-too-sophisticated metaphor for the dangers of alcohol abuse, his story has been told in dozens of really bad movies (including one where he turned into a woman with large breasts).

Doctor Doolittle: The one who reckoned he could talk to the animals. Jaysus. Would you let a man like that examine your genitals?

Doctor Octopus: Arch-enemy of Spiderman. His eight arms would have suggested a career in plate-spinning, but no, he had to go for attempted world domination instead. I told him, but he wouldn't listen. Cuh.





WILL I EVER PLAY THE PIANO



What's the one essential thing your hospital's going to need in abundance if you're going to become a success at this game?

Eh? Hard-working, efficient doctors? State-of-the-art equipment? Attractive, bubbly nurses with Bambi eyes and *Baywatch* bodies, skimpy uniforms and one-drink-and-she's-anybody's demeanours? Sorry to disappoint you, but no. Sick people, that's what you want. Loads and loads of sick people.

You want discomfort. You want illness. You want virulent, malignant disease. Verucas on every foot. Scabs on every knee. Angry throbbing boils spurring sour, stale pus down every cheek. You want to stride into the waiting room and be overpowered by the fetid stench of putrescent wounds and repugnant intestinal gas. You want patients with problems.

It's simple really; the more people you cure, and the more outlandish their conditions, the more money you make. And the better your reputation gets. Oh, and it often means you've saved somebody's life too (as if you give a toss about that). In order to test the player to his or her very limits, Bullfrog have crammed *Theme Hospital* full of disease. It positively quivers with infectious bacteria. Each of these virtual ailments will require research, diagnosis, and treatment — which often involves the construction of specialised machinery. Here's just a taster of the flood of sickness to come.

Written all over you

Many of the diseases you'll come across manifest themselves in fairly obvious ways. Even the most incompetent quack should be able to guess the basic problem behind some of these symptoms...



Jellyitis

Picture the scene: you wake up one morning and discover that your bones have turned to jelly. Nightmare. You'd be

flopping all over the place like a half-inflated sex doll. The back of your head would hit the floor while your feet were still on the ground.



Your arms would bend in all the wrong places. Your skull would look like a punctured beachball. You'd be shit.

Fortunately, there is a cure. Okay, so it may be a little drastic — it involves pouring the victim over a sturdy new skeleton — but who's complaining when basic human dignity's at stake?



Hairyitis

And you thought puberty was bad. Hairyitis is capable of transforming the most smooth, hairless, George Dawes-a-like into a shaggy,

straggly human furball within an alarmingly brief period of time. And it doesn't just affect blokes, either. Attention all women: you should keep an eye on that mildly furry upper lip, those sprouting armpits and that over-enthusiastic crab ladder* in case they all decide to rise up and run riot over every square inch of your flesh. Curing this affliction means the installation of some expensive new equipment chez Hospital, but hey, it's either that or a pair of shears. To cut your own head off with.



Slack Tongue

Tongues are pretty disgusting really. They spend their lives slopping around inside your mouth like some kind of stubby mouth-bound

serpent, only venturing out to insult people, fumble around inside other mouths, or do things involving licking which it's illegal to photograph in this country. And they're unbeaten at getting you into trouble — just

think of all the things you've ever regretted saying (from "of course you won't get pregnant", to "I do").

Slack Tongue disease leaves your mouth's most significant tenant dangling loosely over your chin like an oversized, drool-sodden pendulum. Although having a long, visible tongue may be just the ticket for picking up frustrated housewives, it gets in the way the rest of the time, and can be downright infuriating in an open-top car. Methinks it's time for you to work on a cure... it's the only way you're going to be able to lick this epidemic.



Invisibility

Paradoxically, a symptom that's easy to spot yet impossible to actually see. Invisibility is every

adolescent boy's dream come true. You can sneak into ladies' changing rooms, hide in wardrobes, barge your way into 18-certificate films unchallenged, and generally have a filthy great whale of a time. Until, of course, you start to notice the downside. Everybody looks right past you. Nobody pays any attention to you until you start smashing things. Your clothes don't suit you any more. And it's impossible to hold down a job without being fired for absenteeism. Invisible patients can be a bit of a pain in your hospital, for the simple reason that you often don't notice they're there.

Lurking Danger

Sometimes, however, the problem may not be quite so physically apparent. Here's where the medicine men make the most of the varied diagnostic machinery at their disposal. Assuming you built it, that is...



Uncommon cold

Runny nose, aching limbs, sneezing fits... it can only mean one thing. You're going to die. You're going to die a slow, painful death on a starched white hospital sheet. Either that or you have a cold.

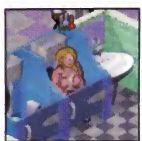
The Uncommon Cold is, apparently,

* Crab Ladder — the none-too-cute little 'ladder' of hair that tries to grow 'twixt navel and toilet parts.



AGAIN?

caused by "eating pizza found under the cooker" (which is probably just desserts), and can be cured fairly easily with some fairly inexpensive drugs. Providing cures for staple illnesses such as these is essential if your hospital's going to be a success. Okay?



The Squits

Nothing ruins your day quicker than a hefty case of the squits. Suddenly finding yourself reminiscing about the firm brown stools which

up until now you'd taken for granted, as your backside napalms the inside of an innocent toilet bowl. Running back to the lavatory moments later with your poor, sore ringpiece burning like a hot red coin as it bravely tries to stem the watery, lumpy slick of unspeakably vile discharge that lurks behind. Filling the bathroom with a thick, cloudy stench so violently repellent that it makes the inside of your nose and throat decay. It is not a pleasant experience.

And it's certainly not the kind of thing you want to reach epidemic proportions within your corridors. Especially if you haven't built enough toilets. Make no mistake, the *Theme Hospital* patients will crap on the floor if they really really have to, and if that doesn't make your caretakers ask for a rise, then I don't know what will.

Mad for it

Not all illnesses attack the physical body. Some of them go to war with your mind. Now, there are two ways you can cure this sort of thing: either beat the patient's brains out with a steak tenderizer or, if you don't fancy cleaning up afterwards, send 'em to a shrink...



TV Personalities

Ross King. Alan Titchmarsh. Sarah Greene. Feeling sick yet? No? Okay, I'll carry on then... Dale Winton. Richard Madeley. Fern Britton.

Eamonn Holmes. Had enough? Good.

Now, if you spend a lot of time in the company of a group of people, the chances are that eventually you'll start to exhibit

some of their character traits. Hang about with a rugby team, and before long you'll find yourself pouring beer over your head, singing obscene songs about marrows, and having sexual intercourse with the Princess of Wales. Get to know a bunch of Frenchmen, and within the week you'll be snorting arrogantly at passers-by, running away from anything that looks vaguely like soap, and nonchalantly slapping a woman with a near-farcical abundance of pubic hair. Monkey see, monkey do.

It therefore follows that those who watch too much daytime television start to behave like the vapid, brainless non-entities who present it. Which is what happens here. At which point they should kill themselves. Or go to hospital.



King Syndrome

Sometimes hero worship gets a little out of hand. Devoted fans can all too easily cross the line between admiration and imitation, leading to many a sad spectacle. Take Liam Gallagher for instance; he worships John

Lennon to the point where he's prepared to grow a beard and don dinky purple sunglasses in order to look like him. The imitation ends there however, since Liam has, sadly, neither the talent nor the crazed, trigger-happy stalkers of his idol. We can but dream.

Patients suffering from King Syndrome are slaves to a delusional belief that they are, in fact, a rather well-known rock 'n' roll star who rose to fame during the 1950s (as you may have guessed, legal restrictions prevent me from naming the rather obvious 'inspiration' for this affliction). Only a decent psychiatrist can get them to snap out of it, so make sure you've got one.

More where that came from

I'm scraping the surface here. *Theme Hospital* actually features over 44 unique diseases. I've only described eight of them. To see more (and indeed, to see the best ones), you'll have to get your hands on the game itself. Nyahh nyahh nyahh.

(Right) Here's the cure for Hairytis in action — the world's biggest electrolysis device. Sufferers walk in looking like Captain Caveman, and walk out looking like George Dawes. Without the nappy.





Illustration from the Chirurgia of Vidius showing a machine used for setting a fracture of the upper arm.



OH, WHAT A LOVELY WARD



From tiny acorns, mighty oak trees grow. One of the joys of *Theme Hospital* is that you're the one planting the seeds, so to speak.

There's nothing quite like seeing a bunch of empty corridors being transformed into a thriving, successful medical miracle house. Provided you don't balls things up, that is. There are a bazillion things to consider at each moment in the game — and if you don't believe me, take a look at this...



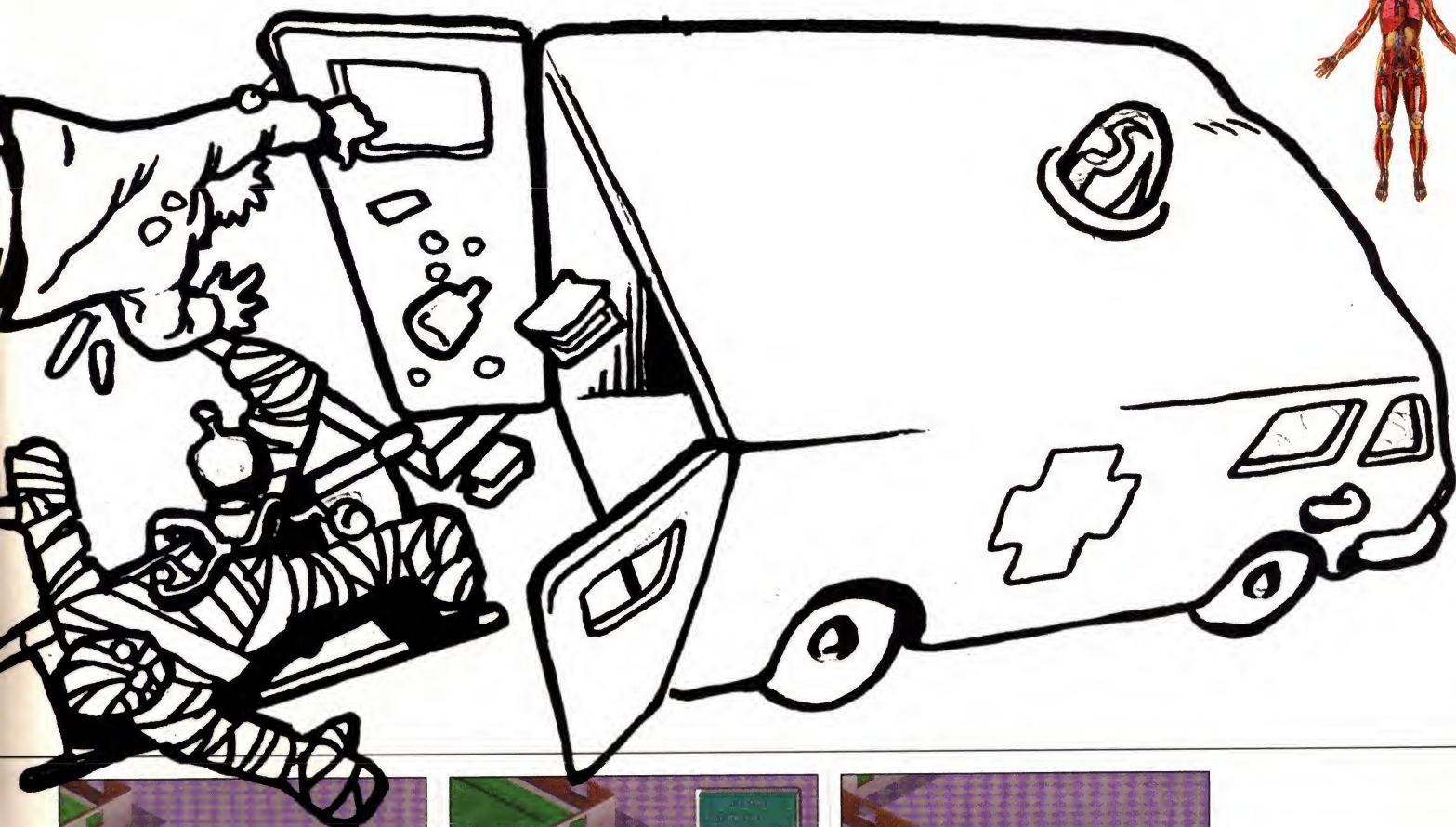
1 You join me during my first pico-second of hospital management. Ahh. Look at the vast, commodious emptiness that greets me. Soon, this vacant shell shall be transformed into a bustling hospital — the finest sanatorium in the land. The sick, and the lame, and the shockingly infirm shall flock to my doors like off-colour sheep, feebly bleating for salvation and succour. And I'll squeeze those bastards for every penny they have.



5 The ball's rolling. Patient number one has arrived. As she knocks on the door, I check out her vital statistics and note that she's freezing cold. Must remember to put some radiators down. But first, I'm going to hire another doctor and chuck him in the diagnosis room.



6 How the hell did you get here, semi-naked in somebody else's room? I'd give my whole life to see it — just you, stood there — only in your underwear. (This caption copyright Jarvis Cocker 1996).



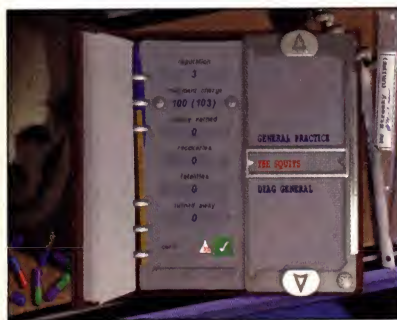
2Time to pick my first member of staff. Now, at the very beginning of the game, your first aim should be to hire a Receptionist — or better still, two Receptionists. There's a finite pool of staff for the area, and if you're aren't quick off the mark the computer player(s) will swipe 'em first. Since no-one will actually visit the place until your 'welcome desks' are in place, they're pretty bloody essential.



3Next I'm going to plan my first room — and it's a GP's office. These are utterly vital. It's the first room that the peaky visitors will enter. Since this one's right opposite the reception desk, it's bound to get quite busy, so I'd better get things right. I'm going to make most of my rooms fairly small as I don't want to start running out of space.



4Right, the doctor's in place and the room's finished. Lovely. Next door I've set up a simple diagnosis clinic — that's where he'll take patients for basic physical check-ups, and the occasional bit of hokey-pokey with the old rectal thermometer (his index finger). I have little respect for privacy, and to this end I've included a window, so that anyone passing by can peer through and have a good laugh.



7Hmm. Sensors indicate that this woman has a chronic case of the squits. Which reminds me, I haven't built any toilets yet. Or hired a cleaner. I'd better cure her rather quickly... which means building a Pharmacy first. And hiring a nurse to run it. Er... this hospital management lark isn't that simple really, is it?



8A short while later and she's leaving the pharmacy, right as rain. That'll be £100, please. Ahh. I can relax. Shit! No! More patients! What's the matter with these people, can't they learn to look after themselves?

creaky old bastards

The two main geezers in charge of *Theme Hospital* are Mark Webley and Gary Carr. They're easy-going, good-humoured and intelligent, so they won't mind me pointing out that they're both slightly older than the 'average' programmer. We're not talking about a pair of Clive Duns here, but I think it's fair to say that compared to the gangly late-teens in most software houses, they're pretty mature. And you know what that means. It means that they can focus their minds. No disrespect to the young, but let's face it, they're all as thick as pig-shit. All they ever think about is sex (which they haven't even tried yet, let alone perfected), acne cream, and MTV.

Mark and Gary are a tad older than that, so they've got most of those things out of their system (except for sex, obviously, unless one of them's slammed his testicles in a car door since I wrote this). Since they can understand and implement complicated concepts, *Theme Hospital* will give the old brain muscle a damn good workout. Blame those two. But not too quietly, or they'll have to use their hearing aids.





succour or sucker?

There are many ways of 'acting the bastard' in a game of *Theme Hospital*. Many revolve around money. Some aren't too subtle, such as hiking the cost of treatment during an epidemic (which only you can cure). Others are a little more devious. For instance, why not place lots

of radiators next to a large waiting room? As the air heats up, people will start to get thirsty. Which is why you've also put loads of drinks machines nearby — which make money, naturally. Heh heh heh. Demand and supply, in one contained area. Sweet mate, sweet.



9 Oi! You! Stop throwing up in my bloody hospital! That icon above his head indicates that he's thirsty — and looking at all that wasted liquid I'm not surprised. If I had my way he'd be down on the floor lapping up that hideous mess he just made. Sadly I can't force him to do that, so I'd better call the caretaker instead.

10 It's a short while later and things are beginning to hot up. I've just built some more facilities — a Psychiatrist's office (I've got some 'TV Personality' sufferers in), and a Research room (so I can discover new things, and improve upon the stuff I already have). Ooh, and what's this? I spy a man with a floppy tongue...

11 It always pays to take note of how your staff are feeling. Take this doctor, for example. He's completely shagged out. And that often leads to costly medical mishaps (not to mention death). Perhaps I'd better hire some more doctors and build a relaxation room for the off-duty workers....



15 Sod disco fever, construction fever, that's what I've got. Here's my latest erection — a massive ward. My plan is to keep loads of patients in for observation (and charge them extra for the privilege). Ho ho ho.

16 All these improvements are costing me money. Time to visit the bank manager and arrange a cash injection. Better not mention that student loan debacle from a few years back...

17 ... and while I've got my financial hat on, I'll make a few changes to hospital policy, too. From now on, it's cash up front from everybody. The changes you make here can significantly alter your chance of success, so it's best to think carefully...

you sicken me

Anyone who's played *Theme Park* will remember the dreaded 'vomit wave' that would strike from time to time. The problem would start whenever someone threw up; the sight (and smell) of their spew would start upsetting stomachs all around, and pretty soon you'd be dealing with a bile-drenched chain reaction. *Theme Hospital* takes things even further, after all, these people are ill to begin with. If you're not careful, your corridors will end up looking like they've been pebble-dashed with light brown porridge. And as for the accompanying sound effects — Sweet Jaysus! They're horrible.



21 Sure enough, in another corner of the hospital, we have a 'red alert' on the cleanliness front. Litter strewn everywhere, puddles of sick... it's like a student hall of residence in here. And is that a pair of shoes on the floor? Or perhaps my first case of 'Invisibility'?

22 Arrrrrggggh! Vomit virus! And see that bloke in the top hat? That's only the bloody Minister of Health on an official visit! It never rains, but it pours. And right now, the spew is pouring across my floors like a burst dam.

multiplayer mode!

Theme Hospital has a link-up mode! Rather than being a hastily-tacked-on afterthought, it actually adds quite a few new dimensions to the game. For starters, you can have a nose around your opponents' hospital if you want (and hopefully poach all his good ideas in the process). You can also head-hunt his premier staff. Most devious of all, you can send infected patients into his waiting rooms, thereby wreaking all manner of havoc — biological warfare at its very best. And that's just the start of it. So, if you've got access to a network or modem, you're in for a big treat(ment). Ahem!



12 Oh dear. Somebody's just dropped dead in the corridor. And here comes the Grim Reaper to see him on his way. Everybody else is just standing around — a damning indictment of modern Britain if ever there was one.



13 Cuh! No wonder people are dropping dead! Half the workforce is lounging around in the new rest room: those good-for-nothing idlers! Why, I ought to beat them to within an inch of their lives for such slothful disregard! Or maybe I should build more GP's offices and hire additional staff...



14 I've also seen fit to create my first 'speciality' clinic — the Tongue Slicing room. This'll take care of all those Slack-Tongue sufferers in a jiffy. And I can make jolly nice sandwiches with the offcuts, too. After all, there's nothing quite like someone else's tongue in your mouth. Especially one that's coated in mustard. Ask your mother if you don't believe me.



18 Meanwhile, outside the Slack Tongue clinic, things are looking grim. The doctor's bugged off, and these two sorry individuals have been waiting for so long they're on the verge of dying of thirst. Better go and find a doctor quickly... but first I think I'll slap a drinks machine down before they start urinating in each others mouths to stay alive. Every little bit helps.



19 That's more like it. I'm doing a roaring trade in tongue curtailing. Doesn't half look painful, mind. I hope that doctor knows what he's doing.



20 Business has proven a little too brisk. The slicing machine's up the spout. Fortunately, my crack team of caretakers is quick to respond. Note, however, that the litter is beginning to pile up outside. Sigh. If it's not one thing it's another...



23 Well, I've hired more caretakers, but it's too late. My reputation is in tatters. The corridor looks like the site of a retching convention. The Minister had to wipe his shoes on the way out. I'd prefer it if you all left me alone now. I'd like to be by myself for a while.





DOCTOR IN' THE MEDICS



We asked a Theme Hospital playtester — Jeff Brutus — to write a few words

describing his average working day. The plan was to help dispel the biggest myth about playtesting — that it's a cushy job. Erm, this was his response...

7.00am: I wake up and realise I'm skint. I wonder how I'm going to get to work. As I put on my shoes, I wonder why the moon is round.

8.15: I arrive at Bullfrog (God knows how) and get down to a serious session of FIFA '97.

8.45: I challenge someone to a game of FIFA '97 for 30 quid.

8.47: I lose 30 quid.

8.48: I challenge someone to a game of Duke 3D for 100 quid.

9.30: I lose 100 quid.

9.31: I go to the toilet.

12.48pm: Someone lets me out of the toilet.

12.49: I do some work.

12.50: I beg Steve for a lift into Guildford so I can get to a cashpoint.

2.30: I return from cashpoint laden with money. I promptly lose all the money in the next hour on an array of foolhardy bets.

3.30: I ring a friend.

5.30: I say goodbye to friend and return to doing some work.

5.45: I wander around the Bullfrog office chatting to people.

7.00: I go to the pub and drink two Becks. I fall over pissed.

7.15: I go home satisfied that a good day's work has been done, blissfully ignorant of the entertainment value given to Bullfrog.

7.35: I untie my shoes and wonder why the earth is round.

(You're fired — Peter Molyneux)

Mark Webley



Role: Project Leader/Lead Programmer

Q: If you had to have part of your body sawn off, which bit would you miss the least and why?

A: My stomach. It gets in the way during conversations, and I could always grow another one if I needed to.

Q: If I stuck a microscopic probe camera inside your head, what would I see?

A: A small plastic car that I put in my ear when I was very small. It still hasn't worked its way out yet.

Q: What's your favourite medicine?

A: The Cocteau Twins

Q: Angels or Casualty? Think carefully now.

A: Only have a vague memory of it — so I'll have to choose Angels.

Q: Tell me a little known medical fact.

A: If you need a wee and hold onto it for too long — when you try to go you might not be able to get the wee out (it's probably happened to everyone). That's because the valve in the wee duct has got so much wee pushing against it, it can't open. You could die if it gets too bad. Mind you, rather than dying you could puncture the base of your thingy to let the pressure out.

Q: Operation — The Mad Doctor's Game or Theme Hospital?

A: Both please.

Andy Bass



Role: Artist

Q: If you had to have part of your body sawn off, which bit would you miss the least and why?

A: My legs: never use them.

Q: If I stuck a microscopic probe camera inside your head, what would I see?

A: There's not a lot in there anyway. The probe would never be seen again and even if it was, it would come out really depressed.

Q: What's your favourite medicine?

A: That blackcurrant stuff your Mum gives you when you are little. (What, Ribena? — Ed.)

Q: Angels or Casualty? Think carefully now.

A: Angels. Oh yes.

Q: Who's your favourite doctor?

A: Dr Doom (kicking the shit out of the Fantastic Four).

Q: Tell me a little known medical fact.

When you sneeze the air comes out of your nose at over 100mph. And when Gary Carr farts he breaks the sound barrier.

Q: What Theme game would you like to see next?

A: Theme Brothel would be good.

Adam Coglan



Role: Animator, win and lose sequences.

Q: If you had to have part of your body sawn off, which bit would you miss the least and why?

A: My tits.

Q: If I stuck a microscopic probe camera inside your head, what would I see?

A: Heaven.

Q: What's your favourite medicine?

A: Guinness. But Benylin gets me there as well.

Q: Angels or Casualty? Think carefully now.

A: Angels definitely. Loads of seventies style nurses. It used to make me feel a bit funny when I was little (but funny in a nice way).

Q: Who's your favourite doctor?

A: Indiana Jones, he's a doctor. The Nazis are always saying stuff like "So we meet again, Doctor Jones"

Q: What makes you sick?

A: Too much medicine

Q: Tell me a little known medical fact.

A: If you took your intestines out and tied them to the back of a Ford Capri which was going to Carlisle then you'd be at the end of the M6 before all your guts unwound. Or something.

Q: What 'Theme' game would you like to see next?

A: Theme Danii Minogue. Or Theme Airport would be fine.

Wayne Imlach



Role: Testing, level design, game balancing/ideas and the killing of fish.

Q: If you had to have part of your body sawn off, which bit would you miss the least and why?

A: Either my left small toe, as all it ever does is manage to get itself smacked off table legs and the like, or my beard, as I hate shaving.

Q: If I stuck a microscopic probe camera inside your head, what would I see?

A: A world not unlike this one a long time ago. Alternatively, a lot of gooey grey mush.

Q: What's your favourite medicine?

A: A good old burning fever to sweat out the illness. The hallucinations you can experience are just mind blowing. Well worth the pain and discomfort.

Q: Angels or Casualty? Think carefully now.

A: Charlie's Angels definitely. Oh, that Angels.

Q: Who's your favourite doctor?

A: I think Jon Pertwee was my favourite

doctor. Tom Baker also did quite a good job. However, ultimately the female assistants got all my attention.

Q: Tell me a little known medical fact.

A: Scrofula is a glandular illness. People seldom die from it.

Gary Carr



Role: Lead Artist

Q: If you had to have part of your body sawn off, which bit would you miss the least and why?

A: My stomach... or perhaps my love handles. No wait, I

could do with losing a chin (is it OK to lose three things?).

Q: What's your favourite medicine?

A: Breakfast, curry or chinese

Q: Angels or Casualty? Think carefully now.

A: Angels, definitely... not much politics, plenty of soap, and a good helping of fat nurses... mmmmm.

Q: What makes you sick?

A: Breakfast, curry or chinese.

Q: Tell me a little known medical fact.

A: It is possible to breathe through your ears (I know, I can!).

Q: Operation — The Mad Doctor's Game or Theme Hospital?

A: We are not worthy... the depth of gameplay, the tactics... the funnybone!

Q: What 'Theme' game would you like to see next?

A: Theme Bullfrog.

Rajan Tande



Role: Programmer

Q: If you had to have part of your body sawn off, which bit would you miss the least and why?

A: My feet — I'd probably be better at football without

them.

Q: If I stuck a microscopic probe camera inside your head, what would I see?

A: My brain, I thought most people had them there. (Obviously you've never taken the trouble to read one of Gary Bushell's columns — Ed.)

Q: What's your favourite medicine?

A: None (Oh, a tough guy, eh? — Ed.)

Q: Angels or Casualty? Think carefully now.

A: Too young for Angels, so I suppose it'll have to be Casualty.

Q: Who's your favourite doctor?

A: Dr Faust

Q: What makes you sick?

A: Leeds United

Q: What 'Theme' game would you like to see next?

A: Theme Huddersfield Town

'Dr' Matt Sullivan



Role: Senior Programmer and Director of Artificial Life.

Q: If you had to have part of your body sawn off, which bit would you miss the least and why?

A: A dog attack at the age of 3 left me with half of my nose missing, so that's of little use to me, and I've had a wooden leg since 'Nam. Pick whichever you want. (Bloody liar — Ed.)

Q: If I stuck a microscopic probe camera inside your head, what would I see?

A: A little sign saying 'eh?'.

Q: What's your favourite medicine?

A: Benylin and Jack Daniels.

Q: Who's your favourite doctor?

A: Dr Ian Cunliffe because he treated a friend of mine (Mark Pitcher) for a rare adult disease. He has since made a full recovery with only superficial scarring.

Q: What makes you sick?

A: The filth, dirt and squalor in the world.

Q: Tell me a little known medical fact.

A: The human heart is so powerful it could pump a petrol tanker full of blood in under one min. If a human never cut their finger nails from birth till they died at age 100 they would be long enough to reach the ground from the top of the Empire State building. It would take a man two weeks of spitting to fill an Olympic size swimming pool.

Q: What 'Theme' game would you like to see next?

A: Theme Programmer (where everyone does my work for me and I can retire with the wife to a hammock in St Lucia).

Matt Chilton



Role: Programmer

Q: What's your favourite medicine?

A: Laying in bright sunshine with a good book is a great way of shaking off the effects of sitting in a darkened office

all day. (So is shooting people from a University Watchtower in the 1960s — Charles Whitman).

Q: Angels or Casualty? Think carefully now.

A: Well, sorry to say this, but anyone who can remember *Angles* is really quite ancient, so I guess it has to be *Casualty*. (We may be ancient, but at least we can spell *Angles*, yer little whippersnapper — Ed.)

Q: Who's your favourite doctor?

A: That has to be the holographic doctor from *Star Trek Voyager*. Yep, I'm a programmer! Don't forget to switch me off when you're finished.

Q: What makes you sick?

A: Playing Mario 64 for eighteen hours non-stop. It was fun, but what a headache I had the day after! (Reminds me of that day up the watchtower — Charles Whitman).

Q: Tell me a little known medical fact (if you know any, that is).

A: Men's ears never stop growing. While alive, that is.

Q: Operation — *The Mad Doctor's Game* or *Theme Hospital*?

A: Operation was exciting enough (when I could find the batteries). Hospital is the winner though, as it has much more depth.

Q: What 'Theme' game would you like to see next?

A: To be honest, Theme Park 2 would get my vote — we could add so much more now.

COMPETITION



Win... a rather exclusive and tasty Bullfrog branded leather jacket with a logo so small you'll be able to wear it down the pub without people taking the piss out of you and saying "Euugh! Look at that sad old git over there! He's wearing a jacket with a games company logo on it!".

Made of real leather and fully lined, it's the ideal fashion item to keep out those cold winter chills and vomit in while hanging around in hospital waiting rooms waiting to be treated.

To win one of these smart and very exclusive items, all you have to do is match the illnesses with the case files of the *Theme Hospital* team and send them in to the address below. Three lucky winners will receive one of these very stylish and socially acceptable leather jackets (see pix right) and a copy of the game.

Ten runners up will also receive a copy of the game. And one loser will 'win' the bucket!

So who's suffering from...

Bloaty Head

Radiation Sickness

Baldy Head

Partial Transparency

Jellyitis

King Syndrome

Alien Syndrome

Hairyitis

Your details

Name:

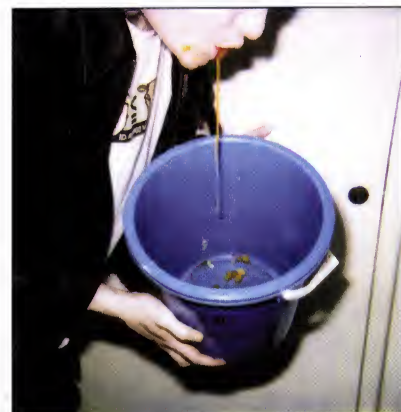
Address:

Daytime Telephone Number:

Size: ☐ Medium ☐ Large ☐ X-Large

Send your entries to:
Theme Hospital Compo
PC Zone
19 Bolsover Street
London W1P 7HJ

All entries must reach us by Friday 20th December, 1996.
All usual arse covering restrictions apply and the editor's decision is final.





PC
ZONE



presented free
with the
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